



REZONING APPLICATION *

* For Rezoning only – no Future Land Use Map (FLUM)
Amendment required

Santa Rosa County Community Planning, Zoning & Development Division
6051 Old Bagdad Highway
Milton, FL 32583

Phone: (850) 981-7075 Fax: (850) 983-9874

E-Mail: Planning-Zoning@santarosa.fl.gov Website: www.santarosa.fl.gov

** FOR OFFICIAL USE ONLY **			
Application No.	_____ -R- _____	Date Received:	_____
		Received by:	_____
FEE:	_____	Receipt #:	_____
Zoning District:	_____	Proposed Zoning District:	_____

Always obtain a new application from the Community Planning, Zoning & Development Division, as it may have been modified. Most Current Revised Application – September 1, 2007. Please check with the Planning and Development Services Division to verify we are accepting applications.

All items on the application must be completed to prevent a delay of your request. Please include an application fee of \$1,000. This fee includes advertising cost, review fees and signs. You will also need to include \$1.46 x each property owner within a 500 feet radius of the property lines or fifteen hundred (1,500) feet radius if located within the Rural Protection Zone. This fee is for the required notification to adjacent property owners to be sent via certificate of mailing (see note below). Please contact the Property Appraiser's Office (6495 Caroline Street, Ste. K in Milton) (983-1880) to obtain the required printout and mailing labels for surrounding property owners at least one week in advance of your application submittal to ensure you receive them by the posted deadline date.

NOTE: Exact fee amounts are determined upon application submittal to avoid excess fees that may result from duplicate mailing labels. Therefore, please do not calculate your fee until Planning & Zoning Staff verifies the specific amount due. Checks made payable to Santa Rosa County are due upon application submittal to the Planning & Zoning Division by close of business on the deadline date posted on the County website at www.santarosa.fl.gov for the applicable public hearing. Credit Card payments are subject to a service fee.

TO BE COMPLETED BY THE APPLICANT:

I. Owner's Name and Home Address: (Please attach proof of ownership)

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Telephone: (_____) _____ Email (optional): _____

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Telephone: (_____) _____ Email (optional): _____

III. **Legal Description of Property** (Attach legal description including most recent survey. *NOTE: If only a portion of a parcel is requested for rezoning, include a legal description with the survey of the specific portion of the property requested for change.*)

Street Address: _____

Subdivision: _____

Provide driving directions to the property from the nearest major intersection. Side streets, landmarks, etc. should be included.

Property Reference Number (i.e., Parcel I.D. Number)--example: 15-1N-28-0120-00800-0040
(Include all applicable*):

(* May be obtained from tax papers, homestead exemption papers, or the Property Appraiser's Office at 850-983-1880)

Existing Zoning: _____ Proposed Zoning: _____

Future Land Use Map (FLUM) Category: _____

Size of Property (acres) requested for Rezoning: _____

If the amendment is granted, the property will be used for:

(Please be as specific as possible.)

IV. Facility Capacity Analysis

You must provide information concerning the site's access to potable water, sewage disposal, solid waste disposal, roads, and stormwater control. If potable water and/or sewage are to be provided by a utility, you must attach a letter from the servicing utility provider that certifies adequate capacity is available to serve the site requested for rezoning. Further, if you are proposing residential development of more than ten (10) acres or more than ten (10) dwelling units per acre, you must provide written correspondence from the School District that provides a school capacity waiver or other accommodation.

A. Potable Water (Check One)

Source:

Private Water Well(s) _____

Private Community System _____

Public Water System _____

(Attach Letter of Certification)

Provider _____

Provider _____

B. Sewage Disposal (Check One)

Source:

Private Septic Tank(s) _____

Private Sewage System _____

Public Sewage System _____

(Attach Letter of Certification)

Provider _____

Provider _____

C. Solid Waste Disposal (Check One)

Source:

Private Hauler _____

Government Hauler _____

D. Storm water Control

Describe how stormwater will be controlled and treated.

E. Traffic Capacity

Describe the potential impacts to affected roadways.

F. **School Capacity** (for rezoning requests involving more than 10 acres of property or proposed for residential development of more than 10 dwelling units per acre)

Potentially affected school(s): _____

(Attach School District correspondence if applicable)

G. **Recreation/Open Space** _____

*****IMPORTANT NOTES*****

- (1) *Your application is not considered complete until **ALL** required information is received.*
- (2) *If you are requesting rezoning to a Planned Unit Development (PUD) or Planned Business District (PBD), you must submit a master plan per the checklist requirements of the Land Development Code, Article 6 (Section 6.05.12 for PUD, or Section 6.05.13 for PBD) with your application. Additionally, a pre-application meeting with Planning & Zoning Staff is strongly encouraged prior to submittal of a PUD or PBD rezoning request.*

V. **Notice Requirements:**

The Planning Department will post a sign on the property prior to the public hearings. Letters stating the requested action(s) to be considered at the Local Planning Board and Board of County Commissioners' meetings will be sent via certificate of mailing by the Planning Department to all property owners within 500 feet of the subject property. As noted previously herein, the applicant is responsible for obtaining a printout and mailing labels from the Property Appraiser's Office indicating all property owners within 500 feet of the property or fifteen hundred (1,500) feet if within the Rural Protection Zone. The printout and labels must be submitted to the Planning & Zoning Office with this application. **Please note the Property Appraiser's Office only provides this information; other questions about the application or the process must be directed to the Planning and Zoning Office.**

VI. **Review Procedure:**

- A. Once an application has been deemed complete, County staff will review the application for consistency with the Comprehensive Plan and Land Development Code.
- B. The Local Planning Board will consider the request at a public hearing and make a recommendation to the Board of County Commissioners (BOCC). The BOCC will consider the Planning Board's recommendation at a subsequent public hearing. The applicant (or his/her representative) will be notified as to the date of the meetings and is strongly encouraged to attend.
- C. If approved by the BOCC, the rezoning becomes effective upon the effective date of the ordinance which is filed in the office of the Secretary of State within ten (10) days of enactment and takes effect upon said filing.
- D. Depending upon the specific proposed use, the applicant may be required to undergo Conditional Use Approval prior to submitting for site plan review. If Conditional Use approval is given or is not required, the applicant must apply for site plan review prior to obtaining any building permits.

VII. Certification and Authorization

- A. By my signature hereto, I do hereby certify that the information contained in this application is true and correct, and understand that deliberate misrepresentation of such information will be grounds for denial or reversal of this application and/or revocation of any approval based upon this application.
- B. I do hereby authorize County staff to enter upon my property at any reasonable time for purposes of site inspection.
- C. I do hereby authorize the placement of a public notice sign(s) on my property at a location(s) to be determined by County staff.
- D. If applicable, I do hereby authorize the Agent described in Part II of this application to act on my behalf in all matters pertaining to this Rezoning petition.

Applicant Name (Type or Print)

Applicant Signature

Title (if applicable)

Date

APPLICATION CHECKLIST
REZONING

1. ____ Owner(s) Name, Home Address and Telephone Number
2. ____ Proof of Ownership
3. ____ Authorized Agent(s) Name, Address, and Telephone Number
4. ____ Agent Authorization
5. ____ Legal Description of Property (for parcel and/or specific portion thereof requested for change):
 - Legal Description Attached ____
 - Street Address ____
 - Parcel ID Number ____
 - Intended Use of Property ____
6. ____ Certified boundary survey of all property requested for rezoning (optional)
7. ____ Conceptual site plan of proposed development demonstrating compatibility with existing land uses * (*If rezoning to PUD or PBD, a master plan meeting the checklist requirements of LDC Article 6 is *required*).
8. ____ Jurisdictional Wetlands Survey (If applicable)
9. ____ Copy of covenants and restrictions (if property is located in a platted subdivision).
10. ____ Signature of owner and agent (if applicable)
11. ____ Application Fee (calculated at the time of application submittal)
12. ____ Certified list of property owners within 500 ft. radius (1,500 ft. within Rural Protection Zone)
13. ____ Labels with the surrounding property owners' addresses (2 sets)
14. ____ Availability Letters from Water and Sewer Provider
15. ____ School district written correspondence providing school capacity waiver or other accommodation (if residential development of more than 10 acres or more than 10 dwelling units per acre is proposed)